B 5 (Official Form 5) (12/07)		REC	EIVED		
UNITED STATES BA	ANKRUPTCY (i.il C.		
NEVADA DISTRICT		FR 16	3 39 PM	INVOLUNTARY '\0 PETITION	
IN RE (Name of Debtor - If Individual: Last, First, M	Middle)	ALL (OTHER NAM	ES used by debtor in the last 8 years	
		J.S. P.A.b.	de married, m	aiden, and trade names.)	
Last four digits of Social-Security or other Individual (If more than one, state all.): 271896684		IN			
STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code)		MAIL	MAILING ADDRESS OF DEBTOR (If different from street address)		
4616 West Sahara Avenue #473 Las Vegas, NV. 89102		į			
COUNTY OF RESIDENCE OR PRINCIPAL PLACE	E OF BUSINESS				
Clark ZIP CODE		ODE		ZIP CODE	
	89102				
CHAPTER OF BANKRUPTCY CODE UNDER WH	IICH PETITION IS FILED	om previously	listed address	es)	
INFOR	MATION REGARDING I	DEBTOR (Ch	eck applicabl	le boxes)	
Nature of Debts	Type of Debtor			Nature of Business	
(Check one box.) Petitioners believe: □ Debts are primarily consumer debts ✓ Debts are primarily business debts	(Form of Organization) □ Individual (Includes Joint Debtor) □ Corporation (Includes LLC and LLP) ✓ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)		ve entities,	(Check one box.) Health Care Business Single Asset Real Estate as defined in 11 U.S.C. § 101(51)(B) Railroad Stockbroker Commodity Broker Clearing Bank Other	
VENUE	<u> </u>	T		FILING FEE (Check one box)	
place of business, or principal assets in the District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.		□ Petitione specified [If a child single petitioner file]	Full Filing Fee attached Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached. Fa child support creditor or its representative is a petitioner, and if the citioner files the form specified in § 304(g) of the Bankruptcy Reform Act of 94, no fee is required.]		
	PTCY CASE FILED BY C				
Name of Debtor	BTOR (Report information for any additional cases on a Case Number		nai cases on a	Date	
Relationship	District			Judge	
ALLEGATIONS (Check applicable boxes) 1. ✓ Petitioner (s) are eligible to file this petition pursuant to 11 U.S.C. § 303 (b). 2. ✓ The debtor is a person against whom an order for relief may be entered under title 11 of the Unite States Code.			he United	COURT USE ONLY	
 3.a. The debtor is generally not paying such debtor the subject of a bona fide dispute as to liability b. Within 120 days preceding the filing of this pe agent appointed or authorized to take charge o debtor for the purpose of enforcing a lien again 	or amount; or tition, a custodian, other than f less than substantially all o	n a trustee reco	eiver, or of the		

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Name of Debtor PHANTOM TOURS,

Case No	
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TRANSFER of Check this box if there has been a transfer of any claim against the evidence the transfer and any statements that are required under	he debtor by or to any petitione	r. Attach all documents that		
Petitioner(s) request that an order for relief be entered against the debtor up petition. If any petitioner is a foreign representative appointed in a foreign recognition is attached.	OR RELIEF nder the chapter of title 11. United !	States Code, specified in this order of the court granting		
Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief. x Signature of Petitioner or Representative (State title)	xSignature of Attorney	Date		
Aleksey Trubétsky 02/16/2010 Name of Petitioner Date Signed	Name of Attorney Firm (If any)			
Name & Mailing Address of Individual Signing in Representative Capacity A201 South Decator Boulevard Apt 2086 Las Vegas, NV. 89103	Address Telephone No.			
x	xSignature of Attorney	Date		
Name of Petitioner Date Signed	Name of Attorney Firm (If any)			
Name & Mailing	Address			
Address of Individual Signing in Representative Capacity	Telephone No.			
xSignature of Petitioner or Representative (State title)	xSignature of Attorney	Date		
Name of Petitioner Date Signed	Name of Attorney Firm (If any)			
Name & Mailing Address of Individual	Address			
Signing in Representative Capacity	Telephone No.			
PETITIONING (
Name and Address of Petitioner Alexeov Trubeteley	Nature of Claim	Amount of Claim		
Alexsey Trubetsky Name and Address of Petitioner	Salary and Commissions	15,668.00		
Name and Address of Femioner	Nature of Claim	Amount of Claim		
Name and Address of Petitioner	Nature of Claim	Amount of Claim		
Note: If there are more than three petitioners, attach additional sheets v penalty of perjury, each petitioner's signature under the statemer and petitioning creditor information in the format above.	Total Amount of Petitioners' Claims			

continuation sheets attached